UNITED STATES ENVIRONMENTAL PROTECTION AGENCY



REGION 6 1445 ROSS AVENUE, SUITE 1200 DALLAS, TX 75202-2733

JUL 1 0 2001

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Ms. Jean A. Mescher Director, Environmental Services Millbrook Distribution Services One Post Street, Suite 2850 San Francisco, CA 94104

RE: Arkwood, Inc. (A3)

Boone County, Arkansas Docket No. 90-1-2-190A

Dear Ms. Mescher:

The Environmental Protection Agency's (EPA's) oversight cost for the period of March 1, 2000, through February 28, 2001, at the Arkwood, Inc. Site is \$11,252.50. In accordance with Section XVII of the Consent Decree, DOJ Case Number 90-11-2-190A, demand is hereby made upon Mass Merchandisers, Inc. for payment of the above sum. An accounting of these costs is enclosed along with the bill. An estimate of the next annual billing is approximately \$5,000.00. A bill will be sent around July 2002.

Payment must be made by mailing a money order, cashier's check, or certified check payable to the "EPA Hazardous Substances Superfund" within thirty (30) days of receipt of this billing to the following address:

U.S. Environmental Protection Agency Superfund Accounting, Region 6 Arkwood, Inc. Site P.O. Box 360582M Pittsburgh, PA 15251 Attention: Superfund Collection Officer

Arkwood, Inc. Site (A3) and DOJ Case Number 90-11-2-190A must be clearly typed on the check to ensure credit.

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You must send simultaneous notice of such payment, including a copy of the money order, cashier's check, or certified check to the following:

Chief, Cost Recovery Section (6SF-AC) U.S. EPA, Region 6 1445 Ross Avenue Dallas, Texas 75202-2733

Your adherence to these procedures will ensure proper credit when payment is received.

If EPA does not receive payment with thirty (30) days of the due date, interest will accrue on the amount due from the due date at the current annual rate prescribed and published by the Secretary of the Treasury in the Treasury Fiscal Requirements Manual Bulleting per annum through the date of payment. Interest will be compounded annually at a new rate every October 1st of the year.

If dispute resolution is invoked, for the purposes of interest calculation, the due date for the disputed amount is the date of final resolution of the dispute

Please take note that an obligation of a PRP to reimburse the United States for past costs incurred by the government in performing a response action at the Site constitutes a "debt" as the term is defined under the Federal Debt Collection Procedures Act, 28 U.S.C. § 3002. Any act to obstruct the EPA's ability to recover moneys received by you may be considered as a violation of the provisions of the Federal Debt Collection Act.

Other penalties for failure to make a timely payment may also apply.

Should you have any questions regarding this billing, please contact Ms. Doretha Chrisian at (214) 665-6734. If you have any technical questions, please contact Mr. Shawn Ghose at (214) 665-6782.

Sincerely yours,

H.J. Parr, Chief

Cost Recovery Section

Enclosures (2)

Bill For Collection	Bill Number 062901T008
Bureau/Office for Remittance Payable	Date
U.S. ENVIRONMENTAL PROTECTION AGENCY - REGION VI	JUL 1 0 2001
Address For Mailing Payment	Bill Amount
P.O. BOX 360582M PITTSBURGH, PA 15251	\$11,252.50

Payer

Ms. Jean A. Mescher Director, Environmental Services Millbrook Distribution Services One Post Street, Suite 2850 San Francisco, CA 94104

DATE	DESCRIPTION		AMOUNT
	To bill you for the oversight costs under Consent Decree, DOJ Case No. 90-11-2-190A, Arkwood, Inc., Site (A3), Boone County, AR. Reference attached letter from EPA Region 6, Cost Recovery Section.	· ·	\$11,252.50
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Important:	A receipt will be issued for all cash remittances when required by applicable procedures. Failure to receive a receipt for cash payment should be reported to the office shown above.	AMOUNT DUE	\$11,252.50

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6SF-AC:5/25/01:CHRISTIAN:ARKWOOD.DEMAND '01

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Sincerely yours,

H.J. Parr, Chief Cost Recovery Section

Enclosures (2)

SENDER: Complete items 1 and/or additional services. Complete items 3, 4a, and 4d. Print your name and address on the reverse of this form so that we can return this card to you. Attach this form to the front of the mailpiece, or on the back if space does not permit. Write 'Return Receipt Requested' on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.		I also to receive following services extra fee): 1. Addresse 2. Restricted Consult postmast	e's Address	eipt Service.
Ms. Jean A. Mescher Director, Environmental Services Millbrook Distribution Services One Post Street, Suite 2850 San Francisco, CA 94104	4b. Service ☐ Registere ☐ Express I	COO O 2 2 3 5 6 Type ed Mail ceipt for Merchandise	☐ Certified ☐ Insured	ou for using Return Rec
5. Received By: (Print Name) 6. Signature: (Addressee or Agent) X PS Form 3811, December 1994	8. Addressee and fee is	o's Address (Only in paid) Domestic Retu	·	Thank)







First-Class Mail Postage & Fees Paid USPS Permit No. G-10

Print your name, address, and ZIP Code in this box • U.S. EPA (6SF-AC) 1445 Ross Avenue Dallas, TX 75202-2722 C)

	CU.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provisco)
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T.J	MILLIbrook Distribution Services imark
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\exists	San Francisco, CA 94104
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LS	Recipient's Name (Please Print Clearly) (To be completed by maller)
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Certified Mail Provides:

- A unique identifier for your mailpiece
 - A signature upon delivery
 - A record of delivery kept by the Postal Service for two years

Important Reminders:

A mailing receipt

- Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
- Certified Mail is not available for any class of international mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inputs.

MEMORANDUM

2001 JUL 16 AM 10:39

SUBJECT:

Request Transmittal for Accounting to set up an Accounts Receivable for monies due to EPAAR/OK/IX BRANCH

FROM:

Cost Recovery Section (6SF-AC)

TO:

John Eagles, Chief

Superfund Accounting Section (6MD-RA)

ATTN:

Rey Gomez

THIS MEMO TRANSMITS THE REQUEST AND INFORMATION NECESSARY TO SET UP AN ACCOUNTS RECEIVABLE FOR THE FOLLOWING:

1. Type of Document: Consent Decree (CERCLA Consent Decree, etc.)

2. Document Classification: Cost Recovery (fine/penalty/cost recovery/state refund, etc.)

3. Docket Number: 90-11-2-190A

Facility/Site Name: Arkwood, Inc.

EPA Facility ID#: ARD084930148

Company Name:

Ms. Jean Mescher, Director

Address:

Environmental Services

Millbrook Distribution Services

One Post Street, Suite 2850

City, State, Zip: San Francisco, CA 94104

5. EPA Contact: Shawn Ghose

> Phone Number: 665-6782

Section: AK/TX Project Management Mail Code: 6SF-AP

Document Date: May 30, 1991

7. Due Date:

6.

30 days

8. Total Amount Due: \$11,252.50

	Installment Method (if app	
	OInstallment	
	1st \$	ON
,	2nd \$	ON
	3rd \$	ON
	4th \$	ON
10.	Establish Accounts Receive	able? <u>X</u> YESNO
11.	Prepare a bill?	X YESNO
12.	Return the bill to the Pro	ogram Office by <u>ASAP</u>
13.	Calculate interest and handling fee on outstanding	YES X NO
	If not, explain in No. 14	below.
14.	Other special instructions	or information:
	Please acknowledge establi	shment of the accounts
	receivable.	
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JY

Christian



Bank

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RECEIVED
2001 AUG 13 PH 3: 11
AR/OK/TX BRANCH

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Cost Recovery Section

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